

TITLE 9. HEALTH SERVICES

CHAPTER 25. DEPARTMENT OF HEALTH SERVICES

EMERGENCY MEDICAL SERVICES

ARTICLE 7. AIR AMBULANCE SERVICE LICENSING

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TITLE 9. HEALTH SERVICES

CHAPTER 25. DEPARTMENT OF HEALTH SERVICES

EMERGENCY MEDICAL SERVICES

ARTICLE 7. AIR AMBULANCE SERVICE LICENSING

R9-25-701. Definitions (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2212, 36-2213, 36-2214, and 36-2215)

In addition to the definitions in A.R.S. § 36-2201, the following definitions apply in this Article and in Article 8 of this Chapter, unless otherwise specified:

1. “Advanced life support” means pertaining to a patient whose condition requires care commensurate with the scope of practice of an EMT-P.
2. “Air ambulance” means an aircraft that is an “ambulance” as defined in A.R.S. § 36-2201.
3. “Air ambulance service” means an ambulance service that operates an air ambulance.
4. “Applicant” means an owner requesting:
 - a. An initial or renewal air ambulance service license under Article 7 of this Chapter,
 - b. An initial or renewal air ambulance certificate of registration under Article 8 of this Chapter, or
 - c. Transfer of an air ambulance service license under R9-25-706.
5. “Base location” means a physical location at which a person houses an air ambulance or equipment and supplies used for the operation of an air ambulance service or provides administrative or other support for the operation of an air ambulance service.
6. “Basic life support” means pertaining to a patient whose condition requires care commensurate with the scope of practice of an EMT-B.
7. “Business organization” means an entity such as an association, cooperative, corporation, limited liability company, or partnership.
8. “Call number” means a unique identifier used by an air ambulance service to identify a specific mission.
9. “CAMTS” means the Commission on Accreditation of Medical Transport Systems, formerly known as the Commission on Accreditation of Air Medical Services.
10. “Change of ownership” means a transfer of controlling legal or controlling equitable interest and authority in an air ambulance service.
11. “Convalescent transport” means conveyance of a patient at a prearranged time when either the patient’s original location or destination is not a health care institution.
12. “Critical care” means pertaining to a patient whose condition requires care commensurate with the scope of practice of a physician or registered nurse.

13. “Current” means up-to-date and extending to the present time.
14. “EMT” means “certified emergency medical technician,” as defined in A.R.S. § 36-2201.
15. “EMT-B” means “basic emergency medical technician,” as defined in A.R.S. § 36-2201.
16. “EMT-I” means “intermediate emergency medical technician,” as defined in A.R.S. § 36-2201.
17. “EMT-P” means “emergency paramedic,” as defined in A.R.S. § 36-2201.
18. “Estimated time of arrival” means the number of minutes from the time that an air ambulance service agrees to perform a mission to the time that an air ambulance arrives at the scene.
19. “Health care institution” has the same meaning as in A.R.S. § 36-401.
20. “Holds itself out” means advertises through print media, broadcast media, the Internet, or other means.
21. “Interfacility” means between two health care institutions.
22. “Licensed respiratory care practitioner” has the same meaning as in A.R.S. § 32-3501.
23. “Maternal” means pertaining to a woman whose pregnancy is considered by a physician to be high risk, who is in need of critical care services related to the pregnancy, and who is being transferred to a medical facility that has the specialized perinatal and neonatal resources and capabilities necessary to provide an appropriate level of care.
24. “Medical direction” has the same meaning as in R9-25-101.
25. “Medical team” means personnel whose main function on a mission is the medical care of the patient being transported.
26. “Mission” means a transport job that involves an air ambulance service’s sending an air ambulance to a patient’s location to provide transport of the patient from one location to another, whether or not transport of the patient is actually provided.
27. “Neonatal” means pertaining to an infant who is 28 days of age or younger and who is in need of critical care services.
28. “On-line medical direction” has the same meaning as in R9-25-101.
29. “On-line medical guidance” means emergency medical services direction or information provided to a non-EMT medical team member by a physician through two-way voice communication.
30. “Operate an air ambulance in this state” means:
 - a. Transporting a patient via air ambulance from a location in this state to another location in this state;
 - b. Operating an air ambulance from a base location in this state; or
 - c. Transporting a patient via air ambulance from a location in this state to a location outside of this state more than once per month.

31. “Owner” means a person that holds a controlling legal or equitable interest and authority in a business enterprise.
32. “Patient” has the same meaning as in R9-25-101.
33. “Patient reference number” means a unique identifier used by an air ambulance service to identify an individual patient.
34. “Pediatric” means for use in the treatment of children or other individuals whose size falls within the scope of a pediatric equipment sizing reference guide.
35. “Pediatric equipment sizing reference guide” means a chart or device, such as a Broselow™ tape, used to determine the size of medical equipment to be used for a patient who is a child or of small stature, generally based on either patient length or age and weight.
36. “Person” means:
 - a. An individual;
 - b. A business organization; or
 - c. An administrative unit of the U.S. government, state government, or a political subdivision of the state.
37. “Personnel” means individuals who work for an air ambulance service, with or without compensation, whether as employees, contractors, or volunteers.
38. “Premises” means each physical location of air ambulance service operations and includes all equipment and records at each location.
39. “Proficiency in neonatal resuscitation” means current and valid certification in neonatal resuscitation obtained through completing a nationally recognized training program such as the American Academy of Pediatrics and American Heart Association NRP: Neonatal Resuscitation Program.
40. “Publicizes” means makes a good faith effort to communicate information to the general public through print media, broadcast media, the Internet, or other means.
41. “Registered nurse” has the same meaning as in A.R.S. § 32-1601.
42. “Regularly” means at recurring, fixed, or uniform intervals.
43. “Rescue situation” means an incident in which:
 - a. An individual’s life, limb, or health is imminently threatened; and
 - b. The threat may be reduced or eliminated by removing the individual from the situation and providing medical services.
44. “Scene” means the location of the patient to be transported or the closest point to the patient at which an air ambulance can arrive.
45. “Subspecialization” means:

- a. For a physician board certified by a specialty board approved by the American Board of Medical Specialties, subspecialty certification;
 - b. For a physician board certified by a specialty board approved by the American Osteopathic Association, attainment of either a certification of special qualifications or a certification of added qualifications; and
 - c. For a physician who has completed an accredited residency program, completion of at least one year of training pertaining to the specified area of medicine.
46. “Two-way voice communication” means that two individuals are able to convey information back and forth to each other orally, either directly or through a third-party relay.
47. “Valid” means that a license, certification, or other form of authorization is in full force and effect and not suspended.
48. “Working day” means the period between 8:00 a.m. and 5:00 p.m. on a Monday, Tuesday, Wednesday, Thursday, or Friday that is not a state holiday.

R9-25-702. Applicability (A.R.S. §§ 36-2202(A)(4) and 36-2217)

This Article and Article 8 of this Chapter do not apply to persons and vehicles exempted from the provisions of A.R.S. Title 36, Chapter 21.1 as provided in A.R.S. § 36-2217(A).

R9-25-703. Requirement and Eligibility for a License (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2212, 36-2213, 36-2214, and 36-2215)

- A.** A person shall not operate an air ambulance in this state unless the person has a current and valid air ambulance service license and, except as provided in A.R.S. § 36-2212(C), a current and valid certificate of registration for the air ambulance as required under Article 8 of this Chapter.
- B.** To be eligible to obtain an air ambulance service license, an applicant shall:
- 1. Hold current and valid Registration and Exemption under 14 CFR 298, as evidenced by a current and valid OST Form 4507 showing the effective date of registration;
 - 2. Hold the following issued by the Federal Aviation Administration:
 - a. A current and valid Air Carrier Certificate authorizing common carriage under 14 CFR 135;
 - b. If operating a rotor-wing air ambulance, current and valid Operations Specifications authorizing aeromedical helicopter operations;
 - c. If operating a fixed-wing air ambulance, current and valid Operations Specifications authorizing airplane air ambulance operations;
 - d. A current and valid Certificate of Registration for each air ambulance to be operated; and

- e. A current and valid Airworthiness Certificate for each air ambulance to be operated;
 - 3. Have applied for a certificate of registration, issued by the Department under Article 8 of this Chapter, for each air ambulance to be operated by the air ambulance service;
 - 4. Hold a current and valid registration, issued by the Arizona Department of Transportation under A.R.S. Title 28, Chapter 25, Article 4, for each air ambulance to be operated by the air ambulance service;
 - 5. Have current and valid liability insurance coverage for the air ambulance service that complies with A.R.S. § 36-2215 and that has at least the following maximum liability limits:
 - a. \$1 million for injuries to or death of any one person arising out of any one incident or accident;
 - b. \$3 million for injuries to or death of more than one person in any one incident or accident; and
 - c. \$500,000 for damage to property arising from any one incident or accident;
 - 6. Have current and valid malpractice insurance coverage for the air ambulance service that complies with A.R.S. § 36-2215 and that has a maximum liability limit of at least \$1 million per occurrence; and
 - 7. Comply with all applicable requirements of this Article, Articles 2 and 8 of this Chapter, and A.R.S. Title 36, Chapter 21.1.
- C. To maintain eligibility for an air ambulance service license, an air ambulance service shall meet the requirements of subsections (B)(1)-(2) and (4)-(7) and hold a current and valid certificate of registration, issued by the Department under Article 8 of this Chapter, for each air ambulance operated by the air ambulance service.

R9-25-704. Initial Application and Licensing Process (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2213, 36-2214, and 36-2215)

- A. To obtain an initial license, an applicant shall submit to the Department an application completed using a Department-provided form and including:
 - 1. The applicant's name; mailing address; fax number, if any; and telephone number;
 - 2. Each business name to be used for the air ambulance service;
 - 3. The physical and mailing addresses to be used for the air ambulance service, if different from the applicant's mailing address;

4. The name, title, address, and telephone number of the applicant's statutory agent or the individual designated by the applicant to accept service of process and subpoenas for the air ambulance service;
5. If the applicant is a business organization:
 - a. The type of business organization;
 - b. The following information about the individual who is to serve as the primary contact for information regarding the application:
 - i. Name;
 - ii. Address;
 - iii. Telephone number; and
 - iv. Fax number, if any;
 - c. The name, title, and address of each officer and board member or trustee; and
 - d. A copy of the business organization's articles of incorporation, articles of organization, or partnership or joint venture documents, if applicable;
6. The name and Arizona license number for the physician who is to serve as the medical director for the air ambulance service;
7. The intended hours of operation for the air ambulance service;
8. The intended schedule of rates for the air ambulance service;
9. The scope of the mission types to be provided, including whether each of the following is to be provided:
 - a. Emergency medical services transports;
 - b. Interfacility transports;
 - c. Interfacility maternal transports;
 - d. Interfacility neonatal transports; and
 - e. Convalescent transports;
10. A copy of a current and valid OST Form 4507 showing the effective date of registration and exemption under 14 CFR 298;
11. A copy of the following issued by the Federal Aviation Administration:
 - a. A current and valid Air Carrier Certificate authorizing common carriage under 14 CFR 135;
 - b. If intending to operate a rotor-wing air ambulance, current and valid Operations Specifications authorizing aeromedical helicopter operations;
 - c. If intending to operate a fixed-wing air ambulance, current and valid Operations Specifications authorizing airplane air ambulance operations;

- d. A current and valid Certificate of Registration for each air ambulance to be operated; and
 - e. A current and valid Airworthiness Certificate for each air ambulance to be operated;
- 12. For each air ambulance to be operated for the air ambulance service:
 - a. An application for registration that includes all of the information and items required under R9-25-802(C); and
 - b. A copy of a current and valid registration, issued by the Arizona Department of Transportation under A.R.S. Title 28, Chapter 25, Article 4;
- 13. A certificate of insurance establishing that the applicant has current and valid liability insurance coverage for the air ambulance service as required under R9-25-703(B)(5);
- 14. A certificate of insurance establishing that the applicant has current and valid malpractice insurance coverage for the air ambulance service as required under R9-25-703(B)(6);
- 15. If the applicant holds current CAMTS accreditation for the air ambulance service, a copy of the current CAMTS accreditation report;
- 16. Attestation that the applicant knows all applicable requirements in this Article, Articles 2 and 8 of this Chapter, and A.R.S. Title 36, Chapter 21.1;
- 17. Attestation that the information provided in the application, including the information in the documents accompanying the application form, is accurate and complete; and
- 18. The dated signature of:
 - a. If the applicant is an individual, the individual;
 - b. If the applicant is a corporation, an officer of the corporation;
 - c. If the applicant is a partnership, one of the partners;
 - d. If the applicant is a limited liability company, a manager or, if the limited liability company does not have a manager, a member of the limited liability company;
 - e. If the applicant is an association or cooperative, a member of the governing board of the association or cooperative;
 - f. If the applicant is a joint venture, one of the individuals signing the joint venture agreement;
 - g. If the applicant is a governmental agency, the individual in the senior leadership position with the agency or an individual designated in writing by that individual; and

- h. If the applicant is a business organization type other than those described in subsections (A)(18)(b) through (f), an individual who is a member of the business organization.
- B. Unless an applicant establishes that it holds current CAMTS accreditation as provided in subsection (C) or is applying for an initial license because of a change in ownership as described in R9-25-706(D), the Department shall conduct an inspection, as required under A.R.S. § 36-2214(B) and R9-25-708, during the substantive review period for the application for an initial license.
- C. To establish current CAMTS accreditation, an applicant shall submit to the Department a copy of its current CAMTS accreditation report, as provided in subsection (A)(15).
- D. The Department shall review and approve or deny each application as described in Article 12 of this Chapter.
- E. The Department may deny an application if an applicant:
 - 1. Fails to meet the eligibility requirements of R9-25-703(B);
 - 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 - 3. Fails or has failed to comply with any provision in this Article or Article 2 or 8 of this Chapter;
 - 4. Knowingly or negligently provides false documentation or false or misleading information to the Department; or
 - 5. Fails to submit to the Department documents or information requested under R9-25-1201(B)(1) or (C)(3), as required under R9-25-1201(D), and requests a denial as permitted under R9-25-1201(E).

R9-25-705. Renewal Application and Licensing Process (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2213, 36-2214, and 36-2215)

- A. Before the expiration date of its current license, an air ambulance service shall submit to the Department a renewal application completed using a Department-provided form and including:
 - 1. The information and items listed in R9-25-704(A)(1)-(11), (12)(b), and (13)-(18); and
 - 2. For each air ambulance operated or to be operated by the air ambulance service:
 - a. A copy of a current and valid certificate of registration issued by the Department under Article 8 of this Chapter; or
 - b. An application for registration that includes all of the information and items required under R9-25-802(C).

- B.** Unless an air ambulance service establishes that it holds current CAMTS accreditation as provided in subsection (C), the Department shall conduct an inspection, as required under A.R.S. § 36-2214(B) and R9-25-708, during the substantive review period for the renewal application.
- C.** To establish current CAMTS accreditation, an air ambulance service shall submit to the Department, as part of the application submitted under subsection (A), a copy of the air ambulance service's current CAMTS accreditation report.
- D.** The Department shall review and approve or deny each application as described in Article 12 of this Chapter.
- E.** The Department may deny an application if an applicant:
 - 1. Fails to meet the eligibility requirements of R9-25-703(C);
 - 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 - 3. Fails or has failed to comply with any provision in this Article or Article 2 or 8 of this Chapter;
 - 4. Knowingly or negligently provides false documentation or false or misleading information to the Department; or
 - 5. Fails to submit to the Department documents or information requested under R9-25-1201(B)(1) or (C)(3), as required under R9-25-1201(D), and requests a denial as permitted under R9-25-1201(E).

R9-25-706. Term and Transferability of License (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213, 36-2214, and 41-1092.11)

- A.** The Department shall issue an initial license:
 - 1. When based on current CAMTS accreditation, with a term beginning on the date of issuance and ending on the expiration date of the CAMTS accreditation upon which licensure is based; and
 - 2. When based on Department inspection, with a term beginning on the date of issuance and ending three years later.
- B.** The Department shall issue a renewal license with a term beginning on the day after the expiration date shown on the previous license and ending:
 - 1. When based on current CAMTS accreditation, on the expiration date of the CAMTS accreditation upon which licensure is based; and
 - 2. When based on Department inspection, three years after the effective date.
- C.** If an applicant submits an application for renewal as described in R9-25-705 before the expiration date of the current license, the current license does not expire until the Department has made a final determination on the application for renewal, as provided in A.R.S. § 41-1092.11.

- D.** A person wanting to transfer an air ambulance service license shall submit to the Department before the anticipated change of ownership:
1. A letter that contains:
 - a. A request that the air ambulance service license be transferred,
 - b. The name and license number of the currently licensed air ambulance service, and
 - c. The name of the person to whom the air ambulance service license is to be transferred; and
 2. An application that complies with R9-25-704(A) completed by the person to whom the license is to be transferred.
- E.** A new owner shall not operate an air ambulance in this state until the Department has transferred an air ambulance service license to the new owner.
- R9-25-707. Changes Affecting a License (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-2213)**
- A.** At least 30 days before the date of a change in an air ambulance service's name, the air ambulance service shall send the Department written notice of the name change.
- B.** At least 90 days before an air ambulance service ceases to operate, the air ambulance service shall send the Department written notice of the intention to cease operating, effective on a specific date, and the desire to relinquish its license as of that date.
- C.** Within 30 days after the date of receipt of a notice described in subsection (A) or (B), the Department shall:
1. For a notice described in subsection (A), issue an amended license that incorporates the name change but retains the expiration date of the current license; and
 2. For a notice described in subsection (B), send the air ambulance service written confirmation of the voluntary relinquishment of its license, with an effective date consistent with the written notice.
- D.** An air ambulance service shall notify the Department in writing within one working day after:
1. A change in its eligibility for licensure under R9-25-703(B) or (C);
 2. A change in the business organization information most recently submitted to the Department under R9-25-704(A)(5) or R9-25-705(A);
 3. A change in its CAMTS accreditation status, including a copy of its new CAMTS accreditation report, if applicable;
 4. A change in its hours of operation or schedule of rates; or
 5. A change in the scope of the mission types provided.

- E.** Before the date of an anticipated change of ownership, a person wanting to transfer an air ambulance service license shall submit to the Department the documents required under R9-25-706(D).

R9-25-708. Inspections and Investigations (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213, and 36-2214)

- A.** Except as provided in subsections (D) and (F), the Department shall inspect an air ambulance service before issuing an initial or renewal license, as required under A.R.S. § 36-2214(B), and as often as necessary to determine compliance with this Article, Articles 2 and 8 of this Chapter, and A.R.S. Title 36, Chapter 21.1.
- B.** A Department inspection may include the premises and each air ambulance operated or to be operated for the air ambulance service.
- C.** If the Department receives written or verbal information alleging a violation of this Article, Article 2 or 8 of this Chapter, or A.R.S. Title 36, Chapter 21.1, the Department shall conduct an investigation.
1. The Department may conduct an inspection as part of an investigation.
 2. An air ambulance service shall allow the Department to inspect the premises and each air ambulance and to interview personnel as part of an investigation.
- D.** As required under A.R.S. § 36-2213(8), the Department shall accept proof of current CAMTS accreditation in lieu of the licensing inspections otherwise required before initial and renewal licensure under subsection (A) and A.R.S. § 36-2214(B).
- E.** To establish current CAMTS accreditation, an applicant or air ambulance service shall submit to the Department a copy of its current CAMTS accreditation report as required under R9-25-704(C), R9-25-705(C), or R9-25-707(D).
- F.** When an application for an air ambulance service license is submitted along with a transfer request due to a change of ownership, the Department shall determine whether an inspection is necessary based upon the potential impact to public health, safety, and welfare.
- G.** The Department shall conduct each inspection in compliance with A.R.S. § 41-1009.

R9-25-709. Enforcement Actions (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213, 36-2214, 36-2215, 41-1092.03, and 41-1092.11(B))

- A.** The Department may take an action listed in subsection (B) against an air ambulance service that:
1. Fails to meet the eligibility requirements of R9-25-703(B) or (C);
 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 3. Fails or has failed to comply with any provision in this Article or Article 2 or 8 of this Chapter; or

4. Knowingly or negligently provides false documentation or false or misleading information to the Department.
- B.** The Department may take the following actions against an air ambulance service:
1. Except as provided in subsection (B)(3), after notice and an opportunity to be heard is provided under A.R.S. Title 41, Chapter 6, Article 10, suspend the air ambulance service license;
 2. After notice and an opportunity to be heard is provided under A.R.S. Title 41, Chapter 6, Article 10, revoke the air ambulance service license; and
 3. If the Department determines that the public health, safety, or welfare imperatively requires emergency action and incorporates a finding to that effect in its order, summarily suspend the air ambulance service license pending proceedings for revocation or other action, as permitted under A.R.S. § 41-1092.11(B).
- C.** In determining whether to take action under subsection (B), the Department shall consider:
1. The severity of each violation relative to public health and safety;
 2. The number of violations relative to the transport volume of the air ambulance service;
 3. The nature and circumstances of each violation;
 4. Whether each violation was corrected and, if so, the manner of correction; and
 5. The duration of each violation.

R9-25-710. Minimum Standards for Operations (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)

- A.** An air ambulance service shall ensure that:
1. The air ambulance service maintains eligibility for licensure as required under R9-25-703(C);
 2. The air ambulance service publicizes its hours of operation;
 3. The air ambulance service makes its schedule of rates available to any individual upon request and, if requested, in writing;
 4. The air ambulance service provides an accurate estimated time of arrival to the person requesting transport at the time that transport is requested and provides an amended estimated time of arrival to the person requesting transport if the estimated time of arrival changes;
 5. The air ambulance service transports only patients for whom it has the resources to provide appropriate medical care, unless subsection (B) or (D) applies;
 6. The air ambulance service does not perform interfacility transport of a patient unless:
 - a. The transport is requested by:

- i. A physician; or
 - ii. A qualified medical person, as determined by the sending health care institution's bylaws or policies, after consultation with and approval by a physician; and
 - b. The destination health care institution confirms that a bed is available for the patient;
 - 7. The air ambulance service creates a prehospital incident history report, as defined in A.R.S. § 36-2220, for each patient;
 - 8. The air ambulance service creates a record for each mission that includes:
 - a. Mission date;
 - b. Mission level—basic life support, advanced life support, or critical care;
 - c. Mission type—emergency medical services transport, interfacility transport, interfacility maternal transport, interfacility neonatal transport, or convalescent transport;
 - d. Aircraft type—fixed-wing aircraft or rotor-wing aircraft;
 - e. Name of the person requesting the transport;
 - f. Time of receipt of the transport request;
 - g. Departure time to the patient's location;
 - h. Address of the patient's location;
 - i. Arrival time at the patient's location;
 - j. Departure time to the destination health care institution;
 - k. Name and address of the destination health care institution;
 - l. Arrival time at the destination health care institution;
 - m. Patient reference number or call number; and
 - n. Aircraft tail number for the air ambulance used on the mission; and
 - 9. The air ambulance service submits to the Department by the 15th day of each month, either in an electronic format approved by the Department or in hard copy, a run log of the previous month's missions that includes the information required under subsections (A)(8)(a)-(d), (f), (g), (i), (j), (l), and (m) in a cumulative tabular format.
- B.** In a rescue situation, when no other practical means of transport, including another air ambulance service, is available, an air ambulance service may deviate from subsection (A)(5) to the extent necessary to meet the rescue situation.
- C.** An air ambulance service that completes a mission under subsection (B) shall create a record within five working days after the mission, including the information required under subsection

- (A)(8), the manner in which the air ambulance service deviated from subsection (A)(5), and the justification for operating under subsection (B).
- D.** An air ambulance service may provide interfacility transport of a patient for whom it does not have the resources to provide appropriate medical care if the sending health care institution provides medically appropriate life support measures, staff, and equipment to sustain the patient during the interfacility transport.
- E.** An air ambulance service shall ensure that each staff member provided by a sending health care institution under subsection (D) has completed training in the subject areas listed in R9-25-713(A) before serving on a mission.
- R9-25-711. Minimum Standards for Mission Staffing (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)**
- A.** An air ambulance service shall ensure that, except as provided in subsection (B):
1. Each critical care mission is staffed by a medical team of at least two individuals with at least the following qualifications:
 - a. A physician or registered nurse, and
 - b. An EMT-P or licensed respiratory care practitioner;
 2. Each advanced life support mission is staffed by a medical team of at least two individuals with at least the following qualifications:
 - a. An EMT-P, and
 - b. Another EMT-P or a licensed respiratory care practitioner; and
 3. Each basic life support mission is staffed by a medical team of at least two individuals, each of whom has at least the qualifications of an EMT-B.
- B.** If the pilot on a mission using a rotor-wing air ambulance determines, in accordance with the air ambulance service's written guidelines required under subsection (C), that the weight of a second medical team member could potentially compromise the performance of the rotor-wing air ambulance and the safety of the mission, and the use of a single-member medical team is consistent with the on-line medical direction or on-line medical guidance received as required under subsection (C), an air ambulance service may use a single-member medical team consisting of an individual with at least the following qualification:
1. For a critical care mission, a physician or registered nurse;
 2. For an advanced life support mission, an EMT-P; and
 3. For a basic life support mission, an EMT-B.
- C.** An air ambulance service shall ensure that:

1. Each air ambulance service rotor-wing pilot is provided written guidelines to use in determining when the weight of a second medical team member could potentially compromise the performance of a rotor-wing air ambulance and the safety of a mission, including the conditions of density altitude and weight that warrant the use of a single-member medical team;
 2. The following are done, without delay, after an air ambulance service rotor-wing pilot determines that the weight of a second medical team member could potentially compromise the performance of a rotor-wing air ambulance and the safety of a mission:
 - a. The pilot communicates that information to the medical team;
 - b. The medical team obtains on-line medical direction or on-line medical guidance regarding the use of a single-member medical team; and
 - c. The medical team proceeds in compliance with the on-line medical direction or on-line medical guidance;
 3. A single-member medical team has the knowledge and medical equipment to perform one-person cardiopulmonary resuscitation;
 4. The air ambulance service has a quality management process to review regularly the patient care provided by each single-member medical team, including consideration of each patient's status upon arrival at the destination health care institution; and
 5. A single-member medical team is used only when no other transport team is available that would be more appropriate for delivering the level of care that a patient requires.
- D.** An air ambulance service that uses a single-member medical team as authorized under subsection (B) shall create a record within five working days after the mission, including the information required under R9-25-710(A)(8), the name and qualifications of the individual comprising the single-member medical team, and the justification for using a single-member medical team.
- E.** An air ambulance service shall create and maintain for each personnel member a file containing documentation of the personnel member's qualifications, including, as applicable, licenses, certifications, and training records.

R9-25-712. Minimum Standards for Air Ambulance Safety, Equipment, and Supplies (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)

An air ambulance service shall ensure that:

1. Each air ambulance in use meets the standards in R9-25-807;
2. The equipment and supplies on an air ambulance are secured, stored, and maintained in a manner that prevents hazards to personnel and patients; and

3. After each mission, an air ambulance's equipment and supplies are checked and replenished as necessary to be in compliance with R9-25-807.

R9-25-713. Minimum Standards for Training (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-2213)

- A. An air ambulance service shall ensure that each medical team member completes training in the following subjects before serving on a mission:
 1. Aviation terminology;
 2. Physiological aspects of flight;
 3. Patient loading and unloading;
 4. Safety in and around the aircraft;
 5. In-flight communications;
 6. Use, removal, replacement, and storage of the medical equipment installed on the aircraft;
 7. In-flight emergency procedures;
 8. Emergency landing procedures; and
 9. Emergency evacuation procedures.
- B. An air ambulance service shall document each medical team member's completion of the training required under subsection (A), including the name of the medical team member, each training component completed, and the date of completion.

R9-25-714. Minimum Standards for Communications (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)

An air ambulance service shall ensure that, while on a mission, two-way voice communication is available:

1. Between and among personnel on the air ambulance, including the pilot; and
2. Between personnel on the air ambulance and the following persons on the ground:
 - a. Personnel;
 - b. Physicians providing on-line medical direction or on-line medical guidance to medical team members; and
 - c. For a rotor-wing air ambulance mission:
 - i. Emergency medical services providers, and
 - ii. Law enforcement agencies.

R9-25-715. Minimum Standards for Medical Control (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)

- A. An air ambulance service shall ensure that:

1. The air ambulance service has a medical director who:
 - a. Meets the qualifications in subsection (B);
 - b. Supervises and evaluates the quality of medical care provided by medical team members;
 - c. Ensures the competency and current qualifications of all medical team members;
 - d. Ensures that each EMT medical team member receives medical direction as required under Article 2 of this Chapter;
 - e. Ensures that each non-EMT medical team member receives medical guidance through:
 - i. Written treatment protocols; and
 - ii. On-line medical guidance provided by:
 - (1) The medical director;
 - (2) Another physician designated by the medical director; or
 - (3) If the medical guidance needed exceeds the medical director's area of expertise, a consulting specialty physician; and
 - f. Approves, ensures implementation of, and annually reviews treatment protocols to be followed by medical team members;
 2. The air ambulance service has a quality management program through which:
 - a. Data related to patient care and transport services provided and patient status upon arrival at destination are:
 - i. Collected continuously, and
 - ii. Examined regularly, on at least a quarterly basis; and
 - b. Appropriate corrective action is taken when concerns are identified; and
 3. The air ambulance service documents each concern identified through the quality management program and the corrective action taken to resolve each concern and provides this information, along with the supporting data, to the Department upon request.
- B.** A medical director shall:
1. Be a physician, as defined in A.R.S. § 36-2201; and
 2. Comply with one of the following:
 - a. If the air ambulance service provides emergency medical services transports, meet the qualifications of A.A.C. R9-25-204(A)(2); or

- b. If the air ambulance service does not provide emergency medical services transports, meet the qualifications of A.A.C. R9-25-204(A)(2) or one of the following:
 - i. If the air ambulance service provides only interfacility maternal missions, have board certification or have completed an accredited residency program in one of the following specialty areas:
 - (1) Obstetrics and gynecology, with subspecialization in critical care medicine or maternal and fetal medicine; or
 - (2) Pediatrics, with subspecialization in neonatal-perinatal medicine;
 - ii. If the air ambulance service provides only interfacility neonatal missions, have board certification or have completed an accredited residency program in one of the following specialty areas:
 - (1) Obstetrics and gynecology, with subspecialization in maternal and fetal medicine; or
 - (2) Pediatrics, with subspecialization in neonatal-perinatal medicine, neonatology, pediatric critical care medicine, or pediatric intensive care; or
 - iii. If neither subsection (B)(2)(b)(i) or (ii) applies, have board certification or have completed an accredited residency program in one of the following specialty areas:
 - (1) Anesthesiology, with subspecialization in critical care medicine;
 - (2) Internal medicine, with subspecialization in critical care medicine;
 - (3) If the air ambulance service transports only pediatric patients, pediatrics, with subspecialization in pediatric critical care medicine or pediatric emergency medicine; or
 - (4) If the air ambulance service transports only surgical patients, surgery, with subspecialization in surgical critical care.

R9-25-716. Minimum Standards for Recordkeeping (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-2213)

An air ambulance service shall retain each document required to be created or maintained under this Article or Article 2 or 8 of this Chapter for at least three years after the last event recorded in the document and shall produce each document for Department review upon request.

R9-25-717. Minimum Standards for an Interfacility Neonatal Mission (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)

An air ambulance service shall ensure that:

1. Each interfacility neonatal mission is staffed by a medical team that complies with the requirements for a critical care mission medical team in R9-25-711(A)(1) and that has the following additional qualifications:
 - a. Proficiency in pediatric emergency care, as defined in R9-25-101; and
 - b. Proficiency in neonatal resuscitation and stabilization of the neonatal patient;
2. Each interfacility neonatal mission is conducted using an air ambulance that has the equipment and supplies required for a critical care mission in Table 1 of Article 8 of this Chapter and the following:
 - a. A transport incubator with:
 - i. Battery and inverter capabilities,
 - ii. An infant safety restraint system, and
 - iii. An integrated neonatal-capable pressure ventilator with oxygen-air supply and blender;
 - b. An invasive automatic blood pressure monitor;
 - c. A neonatal monitor or monitors with heart rate, respiratory rate, temperature, non-invasive blood pressure, and pulse oximetry capabilities;
 - d. Neonatal-specific drug concentrations and doses;
 - e. Umbilical catheter insertion equipment and supplies;
 - f. Thoracostomy supplies;
 - g. Neonatal resuscitation equipment and supplies;
 - h. A neonatal size cuff (size 2, 3, or 4) for use with an automatic blood pressure monitor; and
 - i. A neonatal probe for use with a pulse oximeter;
3. On-line medical direction or on-line medical guidance provided to an interfacility neonatal mission medical team member is provided by a physician who meets the qualifications of R9-25-715(B)(2)(b)(ii); and
4. An individual does not serve on an interfacility neonatal mission medical team unless the air ambulance service's medical director has verified and attested in writing to the individual's having the proficiencies described in subsections (1)(a) and (b).

R9-25-718. Minimum Standards for an Interfacility Maternal Mission (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)

- A. This Section applies to an air ambulance service that holds itself out as providing interfacility maternal missions.
- B. An air ambulance service shall ensure that:
 - 1. Each interfacility maternal mission is staffed by a medical team that complies with the requirements for a critical care mission medical team in R9-25-711(A)(1) and that has the following additional qualifications:
 - a. Proficiency in advanced emergency cardiac life support, as defined in R9-25-101;
 - b. Proficiency in neonatal resuscitation; and
 - c. Proficiency in stabilization and transport of the maternal patient;
 - 2. Each interfacility maternal mission is conducted using an air ambulance that has the equipment and supplies required for a critical care mission in Table 1 of Article 8 of this Chapter and the following:
 - a. A Doppler fetal heart monitor;
 - b. Unless use is not indicated for the patient as determined through on-line medical direction or on-line medical guidance provided as described in subsection (B)(3), an external fetal heart and tocographic monitor with printer capability;
 - c. Tocolytic and anti-hypertensive medications;
 - d. Advanced emergency cardiac life support equipment and supplies; and
 - e. Neonatal resuscitation equipment and supplies;
 - 3. On-line medical direction or on-line medical guidance provided to an interfacility maternal mission medical team member is provided by a physician who meets the qualifications of R9-25-715(B)(2)(b)(i); and
 - 4. An individual does not serve on an interfacility maternal mission medical team unless the air ambulance service's medical director has verified and attested in writing to the individual's having the proficiencies described in subsections (B)(1)(a), (b), and (c).

ARTICLE 8. AIR AMBULANCE REGISTRATION

R9-25-801. Definitions (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-2212)

In addition to the definitions in R9-25-701, the following definitions apply in this Article, unless otherwise specified:

- 1. "Certificate holder" means a person who holds a current and valid certificate of registration for an air ambulance.
- 2. "Drug" has the same meaning as in A.R.S. § 32-1901.

R9-25-802. Requirement, Eligibility, and Application for an Initial or Renewal Certificate of Registration for an Air Ambulance (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-2212, 36-2213, 36-2214, and 36-2240(4))

- A.** A person shall not operate an air ambulance in this state unless the person has a current and valid air ambulance service license as required under Article 7 of this Chapter and, except as provided in A.R.S. § 36-2212(C), a current and valid certificate of registration for the air ambulance as required under this Article.
- B.** To be eligible to obtain a certificate of registration for an air ambulance, an applicant shall:
1. Hold a current and valid air ambulance service license issued under Article 7 of this Chapter;
 2. Hold the following issued by the Federal Aviation Administration for the air ambulance:
 - a. A current and valid Certificate of Registration, and
 - b. A current and valid Airworthiness Certificate;
 3. Hold a current and valid registration for the air ambulance, issued by the Arizona Department of Transportation under A.R.S. Title 28, Chapter 25, Article 4; and
 4. Comply with all applicable requirements of this Article, Articles 2 and 7 of this Chapter, and A.R.S. Title 36, Chapter 21.1.
- C.** To obtain an initial or renewal certificate of registration for an air ambulance, an applicant shall submit to the Department an application completed using a Department-provided form and including:
1. The applicant's name, mailing address, fax number, and telephone number;
 2. All other business names used by the applicant;
 3. The applicant's physical business address, if different from the mailing address;
 4. The following information about the air ambulance for which registration is sought:
 - a. Each mission level for which the air ambulance will be used:
 - i. Basic life support,
 - ii. Advanced life support, or
 - iii. Critical care;
 - b. Whether a fixed-wing or rotor-wing aircraft;
 - c. Number of engines;
 - d. Manufacturer name;
 - e. Model name;
 - f. Year manufactured;
 - g. Serial number;

- h. Aircraft tail number;
 - i. Aircraft colors, including fuselage, stripe, and lettering; and
 - j. A description of any insignia, monogram, or other distinguishing characteristics of the aircraft's appearance;
- 5. A copy of the following issued to the applicant, for the air ambulance, by the Federal Aviation Administration:
 - a. A current and valid Certificate of Registration, and
 - b. A current and valid Airworthiness Certificate;
- 6. A copy of a current and valid registration issued to the applicant, for the air ambulance, by the Arizona Department of Transportation under A.R.S. Title 28, Chapter 25, Article 4;
- 7. The location in Arizona at which the air ambulance will be available for inspection;
- 8. The name and telephone number of the individual to contact to arrange for inspection, if the inspection is preannounced;
- 9. Attestation that the applicant knows all applicable requirements in A.R.S. Title 36, Chapter 21.1; this Article; and Articles 2 and 7 of this Chapter;
- 10. Attestation that the information provided in the application, including the information in the documents accompanying the application form, is accurate and complete;
- 11. The dated signature of:
 - a. If the applicant is an individual, the individual;
 - b. If the applicant is a corporation, an officer of the corporation;
 - c. If the applicant is a partnership, one of the partners;
 - d. If the applicant is a limited liability company, a manager or, if the limited liability company does not have a manager, a member of the limited liability company;
 - e. If the applicant is an association or cooperative, a member of the governing board of the association or cooperative;
 - f. If the applicant is a joint venture, one of the individuals signing the joint venture agreement;
 - g. If the applicant is a governmental agency, the individual in the senior leadership position with the agency or an individual designated in writing by that individual; and

- h. If the applicant is a business organization type other than those described in subsections (C)(11)(b) through (f), an individual who is a member of the business organization; and
 - 12. Unless the applicant operates or intends to operate the air ambulance only as a volunteer not-for-profit service, a certified check, business check, or money order made payable to the Arizona Department of Health Services for the following fees:
 - a. A \$50 registration fee, as required under A.R.S. § 36-2212(D); and
 - b. A \$200 annual regulatory fee, as required under A.R.S. § 36-2240(4).
- D. The Department requires submission of a separate application and fees for each air ambulance.
- E. Except as provided under R9-25-805(C), the Department shall inspect each air ambulance to determine compliance with the provisions of A.R.S. Title 36, Chapter 21.1 and this Article before issuing an initial certificate of registration and at least every 12 months thereafter before issuing a renewal certificate of registration.
- F. The Department shall review and approve or deny each application as described in Article 12 of this Chapter.
- G. The Department may deny a certificate of registration for an air ambulance if the applicant:
 - 1. Fails to meet the eligibility requirements of R9-25-802(B);
 - 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 - 3. Fails or has failed to comply with any provision in this Article or Article 2 or 7 of this Chapter;
 - 4. Knowingly or negligently provides false documentation or false or misleading information to the Department; or
 - 5. Fails to submit to the Department documents or information requested under R9-25-1201(B)(1) or (C)(3), as required under R9-25-1201(D), and requests a denial as permitted under R9-25-1201(E).

R9-25-803. Term and Transferability of Certificate of Registration (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-2212, and 41-1092.11)

- A. The Department shall issue an initial certificate of registration:
 - 1. With a term of one year from date of issuance; or
 - 2. If requested by the applicant, with a term shorter than one year that allows for the Department to conduct annual inspections of all of the applicant's air ambulances at one time.
- B. The Department shall issue a renewal certificate of registration with a term of one year.

- C.** If an applicant submits an application for renewal as described in R9-25-802 before the expiration date of the current certificate of registration, the current certificate of registration does not expire until the Department has made a final determination on the application for renewal, as provided in A.R.S. § 41-1092.11.
- D.** A certificate of registration is not transferable from one person to another.
- E.** If there is a change in the ownership of an air ambulance, the new owner shall apply for and obtain a new certificate of registration before operating the air ambulance in this state.

R9-25-804. Changes Affecting Registration (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), and 36-2212)

- A.** At least 30 days before the date of a change in a certificate holder's name, the certificate holder shall send the Department written notice of the name change.
- B.** No later than 10 days after a certificate holder ceases to operate an air ambulance, the certificate holder shall send the Department written notice of the date that the certificate holder ceased to operate the air ambulance and of the desire to relinquish the certificate of registration for the air ambulance as of that date.
- C.** Within 30 days after the date of receipt of a notice described in subsection (A) or (B), the Department shall:
 - 1. For a notice described in subsection (A), issue an amended certificate of registration that incorporates the name change but retains the expiration date of the current certificate of registration; and
 - 2. For a notice described in subsection (B), send the certificate holder written confirmation of the voluntary relinquishment of the certificate of registration, with an effective date that corresponds to the written notice.
- D.** A certificate holder shall notify the Department in writing within one working day after a change in its eligibility to obtain a certificate of registration for an air ambulance under R9-25-802(B).

R9-25-805. Inspections (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-2212, and 36-2232(A)(11))

- A.** An applicant or certificate holder shall make an air ambulance available for inspection within Arizona at the request of the Department.
- B.** The Department shall conduct each inspection in compliance with A.R.S. § 41-1009.
- C.** As permitted under A.R.S. § 36-2232(A)(11), upon certificate holder request and at certificate holder expense, the annual inspection of an air ambulance required for renewal of a certificate of registration may be conducted by a Department-approved inspection facility.

R9-25-806. Enforcement Actions (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2212, 36-2234(L), 41-1092.03, and 41-1092.11(B))

- A.** The Department may take an action listed in subsection (B) against a certificate holder's certificate of registration if the certificate holder:
1. Fails or has failed to meet the eligibility requirements of R9-25-802(B);
 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 3. Fails or has failed to comply with any provision in this Article or Article 2 or 7 of this Chapter; or
 4. Knowingly or negligently provides false documentation or false or misleading information to the Department.
- B.** The Department may take the following actions against a certificate holder's certificate of registration:
1. After notice and an opportunity to be heard is provided under A.R.S. Title 41, Chapter 6, Article 10, revoke the certificate of registration; and
 2. In case of emergency, if the Department determines that a potential threat to the public health and safety exists and incorporates a finding to that effect in its order, immediately suspend the certificate of registration as authorized under A.R.S. § 36-2234(L).
- C.** In determining whether to take action under subsection (B), the Department shall consider:
1. The severity of each violation relative to public health and safety;
 2. The number of violations relative to the transport volume of the air ambulance service;
 3. The nature and circumstances of each violation;
 4. Whether each violation was corrected and, if so, the manner of correction; and
 5. The duration of each violation.

R9-25-807. Minimum Standards for an Air Ambulance (A.R.S. §§ 36-2202(A)(3), (4), and (5); 36-2209(A)(2); and 36-2212)

- A.** An applicant or certificate holder shall ensure that an air ambulance has:
1. A climate control system to prevent temperature extremes that would adversely affect patient care;
 2. If a fixed-wing air ambulance, pressurization capability;
 3. Interior lighting that allows for patient care and monitoring without interfering with the pilot's vision;
 4. For each place where a patient may be positioned, at least one electrical power outlet or other power source that is capable of operating all electrically powered medical equipment without compromising the operation of any electrical aircraft equipment;

5. A back-up source of electrical power or batteries capable of operating all electrically powered life-support equipment for at least one hour;
6. An entry that allows for patient loading and unloading without rotating a patient and stretcher more than 30 degrees about the longitudinal axis or 45 degrees about the lateral axis and without compromising the operation of monitoring systems, intravenous lines, or manual or mechanical ventilation;
7. A configuration that allows each medical team member sufficient access to each patient to begin and maintain treatment modalities, including complete access to the patient's head and upper body for effective airway management;
8. A configuration that allows for rapid exit of personnel and patients, without obstruction from stretchers and medical equipment;
9. A configuration that protects the aircraft's flight controls, throttles, and communications equipment from any intentional or accidental interference from a patient or equipment and supplies;
10. A padded interior or an interior that is clear of objects or projections in the head strike envelope;
11. An installed self-activating emergency locator transmitter;
12. A voice communications system that:
 - a. Is capable of air-to-ground communication, and
 - b. Allows the flight crew and medical team members to communicate with each other during flight;
13. Interior patient compartment wall and floor coverings that are:
 - a. Free of cuts or tears,
 - b. Capable of being disinfected, and
 - c. Maintained in a sanitary manner; and
14. If a rotor-wing air ambulance, the following:
 - a. A searchlight that:
 - i. Has a range of motion of at least 90 degrees vertically and 180 degrees horizontally,
 - ii. Is capable of illuminating a landing site, and
 - iii. Is located so that the pilot can operate the searchlight without removing the pilot's hands from the aircraft's flight controls;
 - b. Restraining devices that can be used to prevent a patient from interfering with the pilot or the aircraft's flight controls; and

- c. A light to illuminate the tail rotor.
- B.** An applicant or certificate holder shall ensure that:
 - 1. Except as provided in subsection (C), each air ambulance has the equipment and supplies required in Table 1 for each mission level for which the air ambulance is used; and
 - 2. The equipment and supplies on an air ambulance are secured, stored, and maintained in a manner that prevents hazards to personnel and patients.
- C.** A certificate holder may conduct an interfacility critical care mission using an air ambulance that does not have all of the equipment and supplies required in Table 1 for the mission level if:
 - 1. Care of the patient to be transported necessitates use of life-support equipment that because of its size or weight or both makes it unsafe or impossible for the air ambulance to carry all of the equipment and supplies required in Table 1 for the mission level, as determined by the certificate holder based upon:
 - a. The individual aircraft's capabilities,
 - b. The size and weight of the equipment and supplies required in Table 1 and of the additional life-support equipment,
 - c. The composition of the required medical team, and
 - d. Environmental factors such as density altitude;
 - 2. The certificate holder ensures that, during the mission, the air ambulance has the equipment and supplies necessary to provide an appropriate level of medical care for the patient and to protect the health and safety of the personnel on the mission;
 - 3. The certificate holder ensures that, during the mission, the air ambulance is not directed by the air ambulance service or another person to conduct another mission before returning to a base location;
 - 4. The certificate holder ensures that the air ambulance is not used for another mission until the air ambulance has all of the equipment and supplies required in Table 1 for the mission level; and
 - 5. Within five working days after each interfacility critical care mission conducted as permitted under subsection (C), the certificate holder creates a record that includes the information required under R9-25-710(A)(8), a description of the life-support equipment used on the mission, a list of the equipment and supplies required in Table 1 that were removed from the air ambulance for the mission, and the justification for conducting the mission as permitted under subsection (C).

Table 1. Minimum Equipment and Supplies Required on Air Ambulances, By Mission Level and Aircraft Type (A.R.S. §§ 36-2202(A)(3), (4), and (5); 36-2209(A)(2); and 36-2212)

X = Required

ALS = Advanced Life Support Mission

BLS = Basic Life Support Mission

CC = Critical Care Mission

FW = Fixed-Wing Aircraft

RW = Rotor-Wing Aircraft

MINIMUM EQUIPMENT AND SUPPLIES		FW	RW	BLS	ALS	CC
A. Ventilation and Airway Equipment						
1.	Portable and fixed suction apparatus, with wide-bore tubing, rigid pharyngeal curved suction tip, tonsillar and flexible suction catheters, 5F-14F	X	X	X	X	X
2.	Portable and fixed oxygen equipment, with variable flow regulators	X	X	X	X	X
3.	Oxygen administration equipment, including tubing; non-rebreathing masks (adult and pediatric sizes); and nasal cannulas (adult and pediatric sizes)	X	X	X	X	X
4.	Bag-valve mask, with hand-operated, self-reexpanding bag (adult size), with oxygen reservoir/accumulator; mask (adult, pediatric, infant, and neonate sizes); and valve	X	X	X	X	X
5.	Airways, oropharyngeal (adult, pediatric, and infant sizes)	X	X	X	X	X
6.	Laryngoscope handle with extra batteries and bulbs, adult and pediatric	X	X	-	X	X
7.	Laryngoscope blades, sizes 0, 1, and 2, straight; sizes 3 and 4, straight and curved	X	X	-	X	X
8.	Endotracheal tubes, sizes 2.5-5.0 mm uncuffed and 6.0-8.0 mm cuffed	X	X	-	X	X
9.	Meconium aspirator	X	X	-	X	X

MINIMUM EQUIPMENT AND SUPPLIES		FW	RW	BLS	ALS	CC
10.	10 mL straight-tip syringes	X	X	-	X	X
11.	Stylettes for Endotracheal tubes, adult and pediatric	X	X	-	X	X
12.	Magill forceps, adult and pediatric	X	X	-	X	X
13.	Nasogastric tubes, sizes 5F and 8F, Salem sump sizes 14F and 18F	X	X	-	X	X
14.	End-tidal CO ₂ detectors, colorimetric or quantitative	X	X	-	X	X
15.	Portable automatic ventilator with positive end expiratory pressure	X	X	-	X	X
B. Monitoring and Defibrillation						
1.	Automatic external defibrillator	X	X	X	-	-
2.	Portable, battery-operated monitor/defibrillator, with tape write-out/recorder, defibrillator pads, adult and pediatric paddles or hands-free patches, ECG leads, adult and pediatric chest attachment electrodes, and capability to provide electrical discharge below 25 watt-seconds	X	X	-	X	X
3.	Transcutaneous cardiac pacemaker, either stand-alone unit or integrated into monitor/defibrillator	X	X	-	X	X
C. Immobilization Devices						
1.	Cervical collars, rigid, adjustable or in an assortment of adult and pediatric sizes	-	X	X	X	X
2.	Head immobilization device, either firm padding or another commercial device	-	X	X	X	X
3.	Lower extremity (femur) traction device, including lower extremity, limb support slings, padded ankle hitch, padded pelvic support, and traction strap	-	X	X	X	X
4.	Upper and lower extremity immobilization splints	-	X	X	X	X
D. Bandages						

MINIMUM EQUIPMENT AND SUPPLIES		FW	RW	BLS	ALS	CC
1.	Burn pack, including standard package, clean burn sheets	X	X	X	X	X
2.	Dressings, including sterile multi-trauma dressings (various large and small sizes); abdominal pads, 10" x 12" or larger; and 4" x 4" gauze sponges	X	X	X	X	X
3.	Gauze rolls, sterile (4" or larger)	X	X	X	X	X
4.	Elastic bandages, non-sterile (4" or larger)	X	X	X	X	X
5.	Occlusive dressing, sterile, 3" x 8" or larger	X	X	X	X	X
6.	Adhesive tape, including various sizes (1" or larger) hypoallergenic and various sizes (1" or larger) adhesive	X	X	X	X	X
E. Obstetrical						
1.	Obstetrical kit (separate sterile kit), including towels, 4" x 4" dressing, umbilical tape, sterile scissors or other cutting utensil, bulb suction, clamps for cord, sterile gloves, at least 4 blankets, and a head cover	X	X	X	X	X
2.	An alternate portable patient heat source or 2 heat packs	X	X	X	X	X
F. Miscellaneous						
1.	Sphygmomanometer (infant, pediatric, and adult regular and large sizes)	X	X	X	X	X
2.	Stethoscope	X	X	X	X	X
3.	Pediatric equipment sizing reference guide	X	X	X	X	X
4.	Thermometer with low temperature capability	X	X	X	X	X
5.	Heavy bandage or paramedic scissors for cutting clothing, belts, and boots	X	X	X	X	X
6.	Cold packs	X	X	X	X	X
7.	Flashlight (1) with extra batteries	X	X	X	X	X
8.	Blankets	X	X	X	X	X
9.	Sheets	X	X	X	X	X

MINIMUM EQUIPMENT AND SUPPLIES		FW	RW	BLS	ALS	CC
10.	Disposable emesis bags or basins	X	X	X	X	X
11.	Disposable bedpan	X	X	X	X	X
12.	Disposable urinal	X	X	X	X	X
13.	Properly secured patient transport system	X	X	X	X	X
14.	Lubricating jelly (water soluble)	X	X	X	X	X
15.	Small volume nebulizer	X	X	-	X	X
16.	Glucometer or blood glucose measuring device with reagent strips	X	X	-	X	X
17.	Pulse oximeter with pediatric and adult probes	X	X	-	X	X
18.	Automatic blood pressure monitor	X	X	X	X	X
G. Infection Control (Latex-free equipment shall be available)						
1.	Eye protection (full peripheral glasses or goggles, face shield)	X	X	X	X	X
2.	Masks	X	X	X	X	X
3.	Gloves, non-sterile	X	X	X	X	X
4.	Jumpsuits or gowns	X	X	X	X	X
5.	Shoe covers	X	X	X	X	X
6.	Disinfectant hand wash, commercial antimicrobial (towelette, spray, or liquid)	X	X	X	X	X
7.	Disinfectant solution for cleaning equipment	X	X	X	X	X
8.	Standard sharps containers	X	X	X	X	X
9.	Disposable red trash bags	X	X	X	X	X
10.	High-efficiency particulate air mask	X	X	X	X	X
H. Injury Prevention Equipment						
1.	Appropriate restraints (such as seat belts) for patient, personnel, and family members	X	X	X	X	X
2.	Child safety restraints	X	X	X	X	X
3.	Safety vest or other garment with reflective material for each personnel member	-	X	X	X	X
4.	Fire extinguisher	X	X	X	X	X
5.	Hazardous material reference guide	X	X	X	X	X

MINIMUM EQUIPMENT AND SUPPLIES		FW	RW	BLS	ALS	CC
6.	Hearing protection for patient and personnel	X	X	X	X	X
I. Vascular Access						
1.	Intravenous administration equipment, with fluid in bags	X	X	-	X	X
2.	Antiseptic solution (alcohol wipes and povidone-iodine wipes)	X	X	-	X	X
3.	Intravenous pole or roof hook	X	X	-	X	X
4.	Intravenous catheters 14G-24G	X	X	-	X	X
5.	Intraosseous needles	X	X	-	X	X
6.	Venous tourniquet	X	X	-	X	X
7.	One of each of the following types of intravenous solution administration sets: a. A set with blood tubing, b. A set capable of delivering 60 drops per cc, and c. A set capable of delivering 10 or 15 drops per cc	X	X	-	X	X
8.	Intravenous arm boards, adult and pediatric	X	X	-	X	X
9.	IV pump or pumps (minimum of 3 infusion lines)	X	X	-	X	X
10.	IV pressure bag	X	X	-	X	X
J. Medications						
1.	Drugs and drug-related equipment required in the EMT-B Drug List in Exhibit 1 to R9-25-503	X	X	X	-	-
2.	Drugs and drug-related equipment required in the EMT-P and Qualified EMT-I Drug List in Exhibit 1 to R9-25-503	X	X	-	X	X

ARTICLE 12. TIME-FRAMES FOR DEPARTMENT APPROVALS

R9-25-1201. Time-frames (A.R.S. §§ 41-1072 through 41-1079)

- A.** The overall time-frame described in A.R.S. § 41-1072(2) for each type of approval granted by the Department is listed in Table 1. The applicant and the Director may agree in writing to extend the overall time-frame. The substantive review time-frame shall not be extended by more than 25% of the overall time-frame.

- B.** The administrative completeness review time-frame described in A.R.S. § 41-1072(1) for each type of approval granted by the Department is listed in Table 1. The administrative completeness review time-frame begins on the date that the Department receives an application form or an application packet.
1. If the application packet is incomplete, the Department shall send to the applicant a written notice specifying the missing document or incomplete information. The administrative completeness review time-frame and the overall time-frame are suspended from the postmark date of the written request until the date the Department receives a complete application packet from the applicant.
 2. When an application packet is complete, the Department shall send a written notice of administrative completeness.
 3. If the Department grants an approval during the time provided to assess administrative completeness, the Department shall not issue a separate written notice of administrative completeness.
- C.** The substantive review time-frame described in A.R.S. § 41-1072(3) is listed in Table 1 and begins on the postmark date of the notice of administrative completeness.
1. As part of the substantive review time-frame for an application for an approval other than renewal of an ambulance registration, the Department shall conduct inspections, conduct investigations, or hold hearings required by law.
 2. If required under R9-25-403 the Department shall fix the period and terms of probation as part of the substantive review.
 3. During the substantive review time-frame, the Department may make one comprehensive written request for additional documents or information and it may make supplemental requests for additional information with the applicant's written consent.
 4. The substantive review time-frame and the overall time-frame are suspended from the postmark date of the written request for additional information or documents until the Department receives the additional information or documents.
 5. The Department shall send a written notice of approval to an applicant who meets the qualifications in A.R.S. Title 36, Chapter 21.1 and this Chapter for the type of application submitted.
 6. The Department shall send a written notice of denial to an applicant who fails to meet the qualifications in A.R.S. Title 36, Chapter 21.1, and this Chapter for the type of application submitted.

- D.** If an applicant fails to supply the documents or information under subsections (B)(1) and (C)(3) within the number of days specified in Table 1 from the postmark date of the written notice or comprehensive written request, the Department shall consider the application withdrawn.
- E.** An applicant that does not wish an application to be considered withdrawn may request a denial in writing within the number of days specified in Table 1 from the postmark date of the written notice or comprehensive written request for documents or information under subsections (B)(1) and (C)(3).
- F.** If a time-frame's last day falls on a Saturday, Sunday, or an official state holiday, the Department shall consider the next business day as the time-frame's last day.

Table 1. Time-frames (in days)

Type of Application	Statutory Authority	Overall Time-frame	Administrative Completeness Time-frame	Time to Respond to Written Notice	Substantive Review Time-frame	Time to Respond to Comprehensive Written Request
ALS Base Hospital Certification (R9-25-208)	A.R.S. §§ 36-2201, 36-2202(A)(3), and 36-2204(5)	45	15	60	30	60
Amendment of an ALS Base Hospital Certificate (R9-25-209)	A.R.S. §§ 36-2201, 36-2202(A)(3), and 36-2204(5) and (6)	30	15	60	15	60
Training Program Certification (R9-25-302)	A.R.S. §§ 36-2202(A)(3) and 36-2204(1) and (3)	120	30	60	90	60
Amendment of a Training Program Certificate (R9-25-303)	A.R.S. §§ 36-2202(A)(3) and 36-2204(1) and (3)	90	30	60	60	60
EMT Certification (R9-25-404)	A.R.S. §§ 36-2202(A)(2), (3), and (4), 36-2202(G), and 36-2204(1)	120	30	90	90	270
Temporary Nonrenewable EMT-B or EMT-P Certification (R9-25-405)	A.R.S. §§ 36-2202(A)(2), (3), and (4), 36-2202(G), and 36-2204(1) and (7)	120	30	90	90	60
EMT Recertification (R9-25-406)	A.R.S. §§ 36-2202(A)(2), (3), (4), and (6), 36-2202(G), and 36-2204(1) and (4)	120	30	60	90	60

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Extension to File for EMT Recertification (R9-25-407)	A.R.S. §§ 36-2202(A)(2), (3), (4), and (6), 36-2202(G), and 36-2204(1) and (7)	30	15	60	15	60
Downgrading of Certification (R9-25-408)	A.R.S. §§ 36-2202(A)(2), (3), and (4), 36-2202(G), and 36-2204(1) and (6)	30	15	60	15	60
Initial Air Ambulance Service License (R9-25-704)	A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2213, 36-2214, and 36-2215	150	30	60	120	60
Renewal of an Air Ambulance Service License (R9-25-705)	A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2213, 36-2214, and 36-2215	90	30	60	60	60
Transfer of an Air Ambulance Service License (R9-25-706)	A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213, 36-2214, and 41-1092.11	150	30	60	120	60
Initial Certificate of Registration for an Air Ambulance (R9-25-802)	A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-2212, 36-2213, 36-2214, and 36-2240(4)	90	30	60	60	60
Renewal of a Certificate of Registration for an Air Ambulance (R9-25-802)	A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-2212, 36-2213, 36-2214, and 36-2240(4)	90	30	60	60	60
Initial Certificate of Necessity (R9-25-902)	A.R.S. §§ 36-2204, 36-2232, 36-2233, 36-2240	450	30	60	420	60
Provision of ALS Services (R9-25-902)	A.R.S. §§ 36-2232, 36-2233, 36-2240	450	30	60	420	60
Transfer of a Certificate of Necessity (R9-25-902)	A.R.S. §§ 36-2236(A) and (B), 36-2240	450	30	60	420	60
Renewal of a Certificate of Necessity (R9-25-904)	A.R.S. §§ 36-2233, 36-2235, 36-2240	90	30	60	60	60

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Amendment of a Certificate of Necessity (R9-25-905)	A.R.S. §§ 36-2232(A)(4), 36-2240	450	30	60	420	60
Initial Registration of a Ground Ambulance Vehicle (R9-25-1001)	A.R.S. §§ 36-2212, 36-2232, 36-2240	90	30	60	60	60
Renewal of a Ground Ambulance Vehicle Registration (R9-25-1001)	A.R.S. §§ 36-2212, 36-2232, 36-2240	90	30	60	60	60
Establishment of Initial General Public Rates (R9-25-1101)	A.R.S. §§ 36-2232, 36-2239	450	30	60	420	60
Adjustment of General Public Rates (R9-25-1102)	A.R.S. §§ 36-2234, 36-2239	450	30	60	420	60
Contract Rate or Range of Rates Less than General Public Rates (R9-25-1103)	A.R.S. §§ 36-2234, 36-2239	450	30	60	420	60
Ground Ambulance Service Contracts (R9-25-1104)	A.R.S. § 36-2232	450	30	60	420	60
Ground Ambulance Service Contracts with Political Subdivisions (R9-25-1104)	A.R.S. §§ 36-2232, 36-2234(K)	30	15	15	15	Not Applicable
Subscription Service Rate (R9-25-1105)	A.R.S. § 36-2232(A)(1)	450	30	60	420	60